

**UTILITY
PATENT APPLICATION
TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.	16869K-099200US
First Inventor	Uchiumi, Katsuhiro
Title	Control Apparatus Of Storage Unit, and Method of Controlling the Control Apparatus of Storage Unit
Express Mail Label No.	EV346923044US

APPLICATION ELEMENTS		ADDRESS TO	
See MPEP chapter 600 concerning design patent application contents.			
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <i>(Submit an original and a duplicate for fee processing)</i>		Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	
2. <input type="checkbox"/> Applicant claims small entity status. <i>See 37 CFR 1.27.</i>		7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)	
3. <input checked="" type="checkbox"/> Specification [Total Pages 29] <ul style="list-style-type: none"> - Descriptive title of the Invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (<i>if filed</i>) - Detailed Description - Claim(s) - Abstract of the Disclosure 		8. Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i> <ul style="list-style-type: none"> a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: <ul style="list-style-type: none"> i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper number of pages c. <input type="checkbox"/> Statements verifying identity of above copies 	
4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C.113) [Total Sheets 7]		ACCOMPANYING APPLICATIONS PARTS	
5. Oath or Declaration [Total Pages] <ul style="list-style-type: none"> a. <input type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63 (d)) <i>(for a continuation/divisional with Box 18 completed)</i> <ul style="list-style-type: none"> i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 		9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))	
6. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76		10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney <i>(when there is an assignee)</i>	
		11. <input type="checkbox"/> English Translation Document (<i>if applicable</i>)	
		12. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input checked="" type="checkbox"/> Copies of IDS Citations (1)	
		13. <input type="checkbox"/> Preliminary Amendment	
		14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i>	
		15. <input checked="" type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i> (JP2002-313027)	
		16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent	
		17. <input type="checkbox"/> Other:	

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:

Continuation Divisional Continuation-in-part (CIP) of prior application No: _____

Prior application information: Examiner _____ Art Unit: _____

For CONTINUATION OF DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

<input checked="" type="checkbox"/> Customer Number		20350		<input type="checkbox"/> OR	<input type="checkbox"/> Correspondence address below
Name					
Address					
City	State		Zip Code		
Country	Telephone		Fax		
Name (Print/Type)	Robert C. Colwell		Registration No. (Attorney/Agent)	27,431	
Signature			Date	October 28, 2003	

17497 U.S.PTO
 10/696663

 102803

FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 770)

C mplete if Known

Application Number	
Filing Date	
First Named Inventor	Uchiumi, Katsuhiro
Examiner Name	
Art Unit	
Attorney Docket No.	16869K-099200US

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order Other None

Deposit Account:

Deposit Account Number **20-1430**

Deposit Account Name **Townsend and Townsend and Crew LLP**

The Director is authorized to: (check all that apply)

Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) or any underpayment of fee(s)
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code (\$)	Fee Code (\$)		
1001 770	2001 385	Utility filing fee	770
1002 340	2002 170	Design filing fee	
1003 530	2003 265	Plant filing fee	
1004 770	2004 385	Reissue filing fee	
1005 160	2005 80	Provisional filing fee	

SUBTOTAL (1) **(\$770)**

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Independent Claims	Multiple Dependent	Extra Claims	Fee from below	Fee Paid
			5	-20** = 0	X\$18 = \$0
			2	-3** = 0	X\$86 = \$0
				X	

Large Entity	Small Entity	Fee Description
Fee Code (\$)	Fee Code (\$)	
1202 18	2202 9	Claims in excess of 20
1201 86	2201 43	Independent claims in excess of 3
1203 290	2203 145	Multiple dependent claim, if not paid
1204 86	2204 43	** Reissue independent claims over original patent
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) **(\$0)**

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity	Entity	Small Entity	Entity	Fee Description	Fee Paid
Fee Code (\$)	Fee Code (\$)	Fee Code (\$)	Fee Code (\$)		
1051 130	2051 65	1053 130	1053 130	Surcharge - late filing fee or oath	
1052 50	2052 25	1812 2,520	1812 2,520	Surcharge - late provisional filing fee or cover sheet.	
		1804 920*	1804 920*	Non-English specification	
		1805 1,840*	1805 1,840*	For filing a request for reexamination	
		1251 110	2251 55	Requesting publication of SIR prior to Examiner action	
		1252 420	2252 210	Requesting publication of SIR after Examiner action	
		1253 950	2253 475	Extension for reply within first month	
		1254 1,480	2254 740	Extension for reply within second month	
		1255 2,010	2255 1,005	Extension for reply within third month	
		1401 330	2401 165	Extension for reply within fourth month	
		1402 330	2402 165	Notice of Appeal	
		1403 290	2403 145	Filing a brief in support of an appeal	
		1451 1,510	1451 1,510	Request for oral hearing	
		1452 110	2452 55	Petition to institute a public use proceeding	
		1453 1,330	2453 655	Petition to revive – unavoidable	
		1501 1,330	2501 655	Petition to revive – unintentional	
		1502 480	2502 240	Utility issue fee (or reissue)	
		1503 640	2503 320	Design issue fee	
		1460 130	1460 130	Plant issue fee	
		1807 50	1807 50	Petitions to the Commissioner	
		1806 180	1806 180	Petitions related to provisional applications	
		8021 40	8021 40	Submission of Information Disclosure Stmt	
		1809 770	2809 385	Recording each patent assignment per property (times number of properties)	
		1810 770	2810 385	Filing a submission after final rejection (37 CFR § 1.129(a))	
		1801 770	2801 385	For each additional invention to be examined (37 CFR § 1.129(b))	
		1802 900	1802 900	Request for Continued Examination (RCE)	
				Request for expedited examination of a design application	
				Other fee (specify)	

*Reduced by Basic Filing Fee Paid **SUBTOTAL (3)**

(\$)

SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	Robert C. Colwell	Registration No. (Attorney/Agent)	27,431	Telephone	650-326-2400
Signature					Date

October 28, 2003

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